October 28, 2002

Mr. Heller,

You have failed to answer questions from Independent Americans for years. Why?

You have failed to tell me what "Good Cause" is for waiving fines that you have waived for Republicans and Democrats in the past.

You are currently being sued for your treatment of one of our candidates.

I cannot answer your questions until you answer my questions.

I am afraid of criminal prosecution because of your capricious and arbitrary law enforcement techniques, so I must once again claim my rights against self-incrimination on these forms.

I have already given you the questions in writing and will not repeat them now.

Obey the Law Mr. Heller and answer my questions!

Greg Miller Candidate for Assembly District 26

## 2002 CAMPAIGN CONTRIBUTIONS AND EXPENSES District (if applicable) Office (if applicable) Name (print) Telephone No. Mailing Address (include city and zip code) E-Mail Address Select Appropriate Box(es) CANDIDATE PAC BAG POLPRTY INDEXP AMENDED Report #1 — Due August 27, 2002 Office with a 2-year term Period: Jan. 5, 2001 -- Aug. 22, 2002 Office with a 4-year term Period: Dec. 20, 1998 — Aug 22, 2002 Office with a 6-year term Period: Dec. 6, 1996 --- Aug 22, 2002 **BAGs only:** Period: Dec. 7, 2000 - Aug 22, 2002 Report #2 Due — October 29, 2002 Period: Aug. 23, 2002 — Oct. 24, 2002 Report #3 Due — January 15, 2003 FOR OFFICE USE ONLY Period: Oct. 25, 2002 — Jan. 3, 2003 BAGs only: Period: Oct. 25, 2002 - Dec. 5, 2002 BALANCE -This figure should reflect the balance shown on your last Disposition of Unspent Contributions Report, or last Contributions & Expenses Report, if any CONTRIBUTIONS SUMMARY "Contribution" means a gift, loan, conveyance, deposit, payment, transfer or distribution of money or anything of value other than the services of a volunteer received. (NRS 294A.007) 1. Total amount of monetary contributions in excess of \$100 2. Total amount of monetary contributions of \$100 or less Actual number of monetary contributions of \$100 or less 3. Interest and income earned on contributions, if any 4. TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS (add lines 1 through 3) Total amount of In Kind Contributions EXPENSES SUMMARY 6. Total amount of monetary expenses in excess of \$100 7. Total amount of monetary expenses of \$100 or less 8. Expense for filing fee 9. TOTAL AMOUNT OF ALL MONETARY EXPENSES (add lines 6 through 8) Remaining Balance (Subtract line 9 from 4) 10. Total amount of In Kind Expenses I declare under penalty of perjury that the foregoing is true and correct. Date Executed On Signature PAGE OF

Revised: MAR-02

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State of Nevada